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required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995. Application or Docket Number 1 HICATION PATENT APPLICATION FEE DETERMINATION RECORD Substiti Substitute for Form PTO-875 OTHER THANLAIM AS FILED - : . .. **CLAIMS AS FILED - PART I** OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 1) UMBER MLED RATEOR FEE NUMBER EXTRA RATE FEE NUMBER FILED FOR asic fee 17 CFR 1;16(a)) BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS ΩŘ. DCST. Tilgel (37 CFR 1.16(c) minus 20 = الماتة اعتدار INDEPENDENT CLAIMS giligen 🖫 = OR. XX<u>5 (: ()</u> minus 3 = (37 CFR 1.16(b)) .+3<u>-1</u>-OR. MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) Will Committee in comment 21 TOTAL ' If the difference in column 1 is less than zero, enter "0" in column 2. .-. Œ CLAIMS AS AMENDED - . . CLAIMS AS AMENDED - PART II .7 OTHER THAN (Cotumn 2) (Column 3) SMALL ENTITY SMALL ENTITY Column 1) (Column 1) · CLAR HIGHEST CLAIMS RATE **ADDIMAINING** PRESENT RATE ADDI < NUMBER REMAINING TIONAL IONALFTE PREVIOUSLY **EXTRA AFTER** ENDMENT PREMOMENT PAID FOR MENDMENT Total Minus Total OR (37 CFR 1.15(c)) Minus a X:5: -: P--- = OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR 3 TOTAL TOTAL OR ADD'L FEE (Cotum (Column 2) (Column 3) (Column 1) CLAD HIGHEST CLAIMS U | RATE ADDIA:AU NG PRESENT RATE ADDI-REMAINING NUMBER TIONAL IONALF VE PREVIOUSLY **EXTRA AFTER** FEE SEENO: ₽NT AMENDMENT PAID FOR Total īū Minus Minus Total ₽ 2 4 ع کے 2 OR 47 CFR 1.18(c)) Z | Independe IXはいいるまに ให้เก่นร Ð M = OR X S ENTATION OF M LTIPLE DEPENDER wig FIRS) ERE OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTA OR ADD'L FEE ADD'L FEE (Calumn 2) (Column 3) (Column 1) CLAP CL AIMS HIGHEST ADDIMAINING ?! RATE PRESENT ADOI-RATE ပ NUMBER REMAINING TIONALTTE . TIONAL **EXTRA AFTER PREVIOUSLY** ENT P BRUENDMENT FEE AMENDMENT PAID FOR Minus Total Total (37 CFR 1.16(c)) Minus ENDM OR ได้เดบร Minus 32/12 KE OR FHIRIUM OF MAINTHE OF FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR ----TOTAL ADD'L FEE OR-ADO'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 7.5 "Follows Number Reviously Paid For Number Reviously If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

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